

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

03 JAN -2 AM 9:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

J 34015

1. Corporation Name

Turfmaster of Southwest Florida  
Inc.

2. Principal Office Address

108 Tina Island Dr

Suite, Apt. #, etc.

3. Mailing Office Address

108 Tina Island Dr

Suite, Apt. #, etc.

City & State

Osprey FL

City & State

Osprey FL

Zip

34229

Country

USA

Zip

34229

Country

USA

000009795000

01/03/03--01005--008 \*\*300.00

4. Date Incorporated or Qualified  
To Do Business in Florida

1985

5. FEI Number

59-2714281

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Michael G. Herschberger

Street Address (P.O. Box Number is Not Acceptable)

108 Tina Island Dr.

Suite, Apt. #, Etc.

City

Osprey

State

FL

Zip Code

34229

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Michael G. Herschberger  
REGISTERED AGENT MUST SIGN

Date 12/30/02

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	MICHAEL HERSCHBERGER	108 Tina Island Dr.	Osprey FL 34229

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Michael G. Herschberger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL G. HERSCBERGER

12/30/02

Date

941-468-7158

Daytime Phone #

CR2E081 (9/01)

jr 116

Turfmaster of Southwest FL. Inc.  
108 Tina Island Dr.  
Osprey FL 34229

12-30-02

To whom it may concern:

After speaking with Barbara on the phone this morning I received instructions to enclose this letter.

I have moved several times this past year and did not receive a UBR form for the year 2002.

Please find enclosed a corporation reinstatement form I downloaded and new current information on my business.

Barbara told me to make a check payable for \$300.<sup>00</sup> for 2002 & 2003 filing.

Thank you!

Michael E. Heubly

Turfmaster of Southwest FL. Inc.